

DEPARTMENT USE ONLY			
DEC APPLICATION NO.			
ACTIVITY NUMBER(S)			

## New York State Department of Environmental Conservation RECORD OF COMPLIANCE SUPPLEMENTAL INFORMATION FORM

1. APPLICANT NAME:				
2. ADDRESS:				
CITY:	STATE/ZIP:			
	OF THE OWNERS/PARTNERS O ANY OTHER NAME THEY ARE			
4. PLEASE LIST THE NAMES OF ALL OTHER COMPANIES THAT ARE OWNED OR PARTLY OWNED BY THE PEOPLE LISTED ABOVE**. Also list the companies that own or control or are related to the applicant company, all subsidiaries, parent companies, sister companies. Also include ADDRESSES, WEBSITE ADDRESSES, and WHAT EACH LISTED COMPANY DOES (BUSINESS FIELD, e.g., "Solid Waste Transfer" or "Cement Plant" or "Real Estate Holding Co").				
RELATED COMPANY NAME	COMPANY ADDRESS	COMPANY WEBSITE	BUSINESS FIELD	
5. CERTIFICATION BY APPLICANT: I certify that the above information is true to the best of my knowledge. I am aware that any false and/or misleading statements may be subject to prosecution under NYS Penal law.				
Signature:	Date:	Email address:		
Name (Print or type):	Print or type): Title (Print or type):			

<sup>\*</sup> This form is applicable not only to the immediate entity but to any other corporation, partnership, association or organization in which the applicant holds or has held a substantial interest or in which it has acted as a high managerial agent or director or any other individual, corporation, partnership or organization which holds a substantial interest or the position of high managerial agent or director in the applicant.

<sup>\*\*</sup> If the applicant company is owned by another company, corporation, partnership, association or organization, then the companies that need to be listed are all of the companies owned or controlled by the largest parent organization involved.